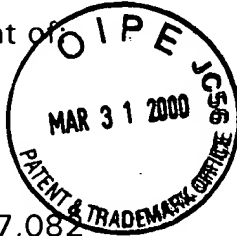


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application or Patent of Vincent J. KIDD; Jill M. LAHTI; and
Tai TEITZ



Serial or Patent No: 09/477,082 or Issued: December 30, 1999

For: A TUMOR SUPPRESSOR PROTEIN INVOLVED IN DEATH SIGNALLING AND
DIAGNOSTIC THERAPEUTICS, AND SCREENING BASED ON THIS PROTEIN

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
NONPROFIT ORGANIZATION

I hereby declare that I am an official empowered to act on behalf of the nonprofit
organization identified below:

NAME OF ORGANIZATION: ST. JUDE CHILDREN'S RESEARCH HOSPITAL

ADDRESS OF ORGANIZATION: 332 North Lauderdale Street, Memphis, Tennessee
38105-2794

TYPE OF ORGANIZATION

- ☐ University or other institution of higher education
- ☒ Tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3))
- ☐ Nonprofit scientific or educational under statute of state of the United States of America
(name of state:)
(citation of statute:)
- ☐ Would qualify as tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3)) if located in the United States of America

- ☐ Would qualify as nonprofit scientific or educational under statute of state of the United States of America if located in the United States of America
(name of state:)
(citation of statute:)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. §1.9(e) for purposes of paying reduced fees under Section 41(a) or (b) of Title 35, United States Code with regard to the invention entitled by inventor(s) described in

- ☐ the specification filed herewith
☒ application Serial No. 09/477,082 filed December 30, 1999
☐ Patent No. , issued

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. §1.27)

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time

of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. §1.28(b)).

I HEREBY DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE, AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION, ANY PATENT ISSUING THEREON, OR ANY PATENT TO WHICH THIS VERIFIED STATEMENT IS DIRECTED.

Name of Person Signing: **BARBARA S. CONTA**

Title in Organization: **Vice President,
Technology Development and Licensing**

Address of Person Signing: **St. Jude Children's Research Hospital
332 North Lauderdale
Memphis, Tennessee 38105-2794**

Signature: Barbara S. Conta Date: 3/16/00

NONPROFIT ORGANIZATION

REV. 06/98

sector
4/

CERTIFICATE OF MAILING

I hereby certify that this paper and every paper referred to therein as being enclosed is being deposited with the U.S. Postal Service as first class mail, postage prepaid, in an envelope addressed to: Commissioner of Patents & Trademarks, Washington, DC 20231.

on March 27, 2000 (Date of Deposit)

3/27/00
Date

Deek
Name



File No.: 2427/1E988-US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Vincent J. KIDD et al.

Serial No.: 09/477,082

Group Art Unit: 1643

Filed: December 30, 1999

Examiner: Not Yet Assigned

For: TUMOR SUPPRESSOR PROTEIN INVOLVED IN DEATH SIGNALING,
AND DIAGNOSTICS, THERAPEUTICS, AND SCREENING BASED
ON THIS PROTEIN

Hon. Commissioner of
Patents and Trademarks
Washington, DC 20231

Sir:

COMPLETION OF PATENT APPLICATION

The following items are submitted herewith in completion of the above-identified patent application:

1. Declaration, petition and power of attorney
2. Check in the amount of \$888.00, (783.00 filing; 65.00 surcharge; 40.00 recording) (See attached Fee Computation Sheet)

3. ☐ Formal drawings, sheets (Figs.)
 ☐ Informal drawings, sheets (Figs.)
4. ☒ Assignment for recording to: ST. JUDE CHILDREN'S
RESEARCH HOSPITAL
5. ☒ Verified statement claiming small entity status.
 PARTIAL REFUND of all fees paid within last 2 months is REQUESTED.
6. Copy of Notice to File Missing Parts of Application Filing Date Granted dated 2/10/00.

Priority is claimed for this application, corresponding application/s having been filed as follows:

Country:
Number:
Date:

The priority documents ☐ are enclosed
 ☐ will follow

The Patent Office is authorized to charge any deficiency up to \$300.00 in the above fees, and to credit any excess, to our Deposit Account No. 4-0100.

Dated: March 27, 2000

Respectfully submitted,



Paul F. Fehlner
Reg. No. 35,135
Attorney for Applicant(s)

DARBY & DARBY P.C.
805 Third Avenue
New York, NY 10022
212-527-7700

PATENT FEE COMPUTATION SHEET

	No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee				\$690.00
Total Claims	47 - 20	- =	27 x \$18.00	\$486.00
Independent Claims	8 - 3	- =	5 x \$78.00	\$390.00
Multiple Dependent Claims		x- if so, add	\$260.00	\$
Surcharge for late submission of filing fee and/or declaration (\$130.00)				\$130.00
SUBTOTAL				\$1696.00
[X] Small Entity REDUCTION (Half of Subtotal)				\$848.00
Fee for recordation of assignment (\$40.00)				\$40.00
Charge for filing non-English language application (\$130.00)				\$
TOTAL				\$888.00

BEST AVAILABLE COPY



UNITED STATES DEPARTMENT OF COMMERCE

Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
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1000 1000
1000 1000
NEW YORK NY 10012



DATE MAILED:

12/10/00

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a

☐ small entity (statement filed) ☒ non-small entity is \$ 1000

☒ 1. The statutory basic filing fee is:

- ☒ missing.
☐ insufficient.

Applicant must submit \$ 1000 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

☒ 2. The following additional claims fees are due:

\$ 400 for 27 total claims over 20.
\$ 50 for 2 independent claims over 3.

\$ _____ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

☐ 3. The oath or declaration:

- ☐ is missing or unsigned.
☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

☒ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

All Inventors
An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

☐ 7. Your filing receipt was mailed in error because your check was returned without payment.

☐ 8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice **MUST** be returned with the reply.

Customer Service Center

Patent Examination Division (703) 308-1202

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345.00 OP
65.00 OP
243.00 OP
195.00 OP
C:201
C:205
C:203
C:202